LOBBYING EXPENDITURE REPORT COVERING JANUARY 1 THROUGH JUNE 30 DUE AUGUST 15 COVERING JULY 1 THROUGH DECEMBER 31, 2003	Lubhyist's Registration Number		
DUE FEBRUARY 15	FOR OFFICE USE ONLY Postmark Date Folycol Date		
Instructions Print in ink or type. Fill in Registration Number in spaces provided.	EL 2		
 Complete form and return to the Board of Ethics, 2415 Quait Dr., 3rd Floor, Bason Rivinge, LA 70808 (225) 763-8777 or (800) 842-6630. This form must be delivered or postmarked by the due date. This form may be faxed to (225) 763-8787. 			
	1040443		
1. Name Finn John J. Lust Metropolitan Hospital Council of Metropolitan Hospital Council of Street and No. 2. Business Address 4450 Severn Avenue Suite 21. Street and No. City	F New Orleans o Metatric LA 70001		
Mailing Address Same as above	'State Zip		
3. Business Phone 504 837-1171 Area Code and Telephone Number			
4. Total of e) expenditures made January 1 through June 30: 5	413.86		
5. Total of all expenditures made July 1 through December 31: \$	0.00		
6. Total of all expenditures made during calendar year: (Line 4 added with Line 5 should equal Line 6)	413.86		
7. Did you make an expenditure exceeding \$50 on one occasion for any on	e legislator:		
From January 1 through June 30? Yes No From July 1 through December 31? Yes No	□ NA		
If the answer to either question in Number 7 above is YES, please complete Name 12. Nov. 1001	ete Schedule A and attach.		

LOBBYING EXPENDITURE REPORT



8.	Did you make expenditures exceeding the sum of \$250 for any one legislator:						
	From January 1 through June 30? From July 1 through December 31?	Yes Yes	No No		NA		
	If the answer to either question in Number 8 above is YES, please complete Schedule A and attach.						
9.	Did you expend funds for a reception, social gathering, or other function to which the entire legislature, either house, any standing committee, select committee, stanutory committee, committee created by resolution of either house, subcommittee of any committee, recognized caucus, or any delegation thereof were invited during the reporting period?						
	☑ Yes		□ No				
	If the answer to Number 9 above is YES, please complete Schedule B and attach.						

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; that all reportable expenditures have been included herein; and that no information required by the Lobbyist Disclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted.

Signature of Lobbyist

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METRO HOSP CNCL

SCHEDULE B: EXPENDITURES FOR RECEPTIONS, ETC.

This Schedule must be completed if you answered YES to question 9 on the Lobbying Expenditure Report. The following information must be provided for all receptions, social gatherings, or other functions to which the entire legislature, either house, any standing committee, select committee, statutory committee, committee created by resolution of either house, subcommittee of any committee, recognized caucus, or any delegation thereof, was invited.

1. NAME(S) OF GROUP(S) INVITED	2. DATE OF RECEPTION	J. LOCATION OF RECEPTION	4. TOTAL AMOUNT OF EXPENDITURES POR ATTENDING LEGISLATORS
House Floor	06/01/03	Louisiana State Capitol Baton Rouge, LA	413,86
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^{*} No amount expended on persons other than attending legislators is reportable.

Form 502, Ray 1050